



THOMAS M. MENINO
MAYOR

BOSTON INSPECTIONAL SERVICES DEPARTMENT

OFF HOUR INSPECTION REQUEST

As a condition to scheduling off-hours inspections, The Boston Inspectional Services requires an initial payment of \$200.00 from the person requesting the off-hour inspection. If the off-hour inspection exceeds four (4) hours, the applicant agrees to pay any additional costs associated with the inspection to the Boston Inspectional Services Department upon receipt of an invoice from the Boston Inspectional Services Department.

APPLICATION INFORMATION ***** INSPECTION REQUEST

Date of request: _____ Applicant's Name: _____

(Person to be contact by ISD)

LOCATION OF INSPECTION: _____

Billing Address: _____ Phone # _____

Requested Inspection date: _____ Time: _____

Reason for Inspection: _____

PERMIT # _____ Bldg. _____ Elec. _____ Mech. _____ Health _____

Applicant Signature: _____

Please Print Name: _____

REQUEST APPROVED: YES: _____ NO: _____

Supervisor: _____ Date: _____

APPROVED: _____

Payment received: (Yes _____) (No _____) Amount: \$ _____

Date of payment _____

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